POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	VIN.N		09-19-01
O.I.P.E. CLASSIFIER		20	9/27
FORMALITY REVIEW	4L	1124	10/15/01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✔ .... Rejected	N .... Non-elected
= .... Allowed	I .... Interference
— (Through numeral)... Canceled	A .... Appeal
÷ .... Restricted	O .... Objected

Claim	Date								
Final / Original	06/19/03	11/7/03	7/27/00						
1	✔	✔	✔						
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42	✔	✔	✔						
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Claim	Date								
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Claim	Date								
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If more than 150 claims or 10 actions
staple additional sheet here

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